

58730 U.S. Highway 41 Calumet, MI 49913

TEL (906) 337-3603 FAX (906) 337-1121

www.glmutual.com

Statement of Occupancy
I hereby state that the property at
STREET ADDRESS / CITY / STATE / ZIP CODE
is not a rooming / boarding house, the lease is for a period of no less than 12 months (student rentals – no less than 9 months) and is tenant-occupied at this time.
If student occupied – there are 8 or less student occupants and all occupants have signed the lease agreement.
I agree to immediately notify my agent or the Company should any of the following changes occur:
<ul> <li>The lease is changed to a period of less than 12 months (or 9 months for student rentals)</li> <li>Is unoccupied for greater than 60 days</li> </ul>
I further understand that coverage and rating will be changed to vacant occupancy.
I accept full responsibility to comply with the notice requirement, and understand that failure to notify the Company of a change in occupancy or use of said property could compromise the coverage provided within the insurance policy.
INSURED NAME (PLEASE PRINT)
INSURED SIGNATURE
DATE (MONTH / DAY / YEAR)